

CITY OF MIAMI BEACH  
Office of the City Manager  
Letter to Commission No. 102-2004

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**To:** Mayor David Dermer and  
Members of the City Commission

**Date:** May 3, 2004

**From:** Jorge M. Gonzalez  
City Manager

A handwritten signature of Jorge M. Gonzalez.

**Subject:** **Petitions – May 5, 2004 City Commission Agenda, Item R5E**

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On Monday, May 3, 2004, I was given copies of 48 petitions which I have forwarded to the City Clerk. Included with some of the petitions are a Survey and some also have attached a copy of a completed Florida Voter Registration Application.

Attached for your perusal is a copy of one of the petitions which has a Survey and a completed Florida Voter Registration Application.

Handwritten initials, likely JMG.

JMG\REP

Mayor David Dermer  
Commissioner Luis R. Garcia Jr.  
Commissioner Saul Gross  
Commissioner Matti Herrera Bower  
Commissioner Simon Cruz  
Commissioner Richard Steinberg  
Commissioner Jose Smith  
City Manager Jorge M. Gonzalez  
City of Miami Beach  
1700 Convention Center Drive  
Miami Beach, Florida 33139

**Request for Economic Impact Statement as required by Miami Beach City Charter Article V (as amended) 5.02 requiring the Miami Beach City Commission's consideration of the 5 year economic impact of legislative acts for Agenda Item #R5D on April 14, 2004 and Proposed 2 a.m. Cutoff on Alcohol Sales South of Fifth Street**

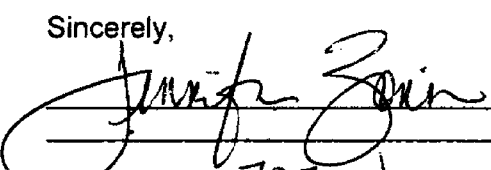
I AM 100% OPPOSED to the proposed legislative acts to prohibit any new restaurants with an entertaining or dancing component South of Fifth Street and in the Sunset Harbor area (Item R5D) and the proposed 2 a.m. cut-off on the sale of alcohol South of Fifth Street.

The prosperity of the South of Fifth Street area and Sunset Harbor area depends on a solid resident base *and* an abundance of restaurants to service them. Any regulation on restaurants creates a disincentive for new proprietors to make an investment in restaurants in those areas, diminishes the value of the current investments made by existing restaurants, and creates a barrier to the long-term success of all restaurants. To attract new quality restaurants or motivate existing restaurants to invest, owners must know the certainty of their future and their sales potential. I believe any ordinance intended to limit restaurants with an entertainment and dancing component or limit the sale of alcohol to 2 a.m. in those areas would have a significant negative economic impact on the City of Miami Beach, and an economic impact study is required by the City's Charter to analyze the potentially detrimental economic impact to our resort taxes, jobs, new investment in businesses, tourism revenue in those areas and property values.

I hereby request that the city provide the Economic Impact Study required by the City Charter, and request that no further action be taken on its proposed legislative acts to prohibit any new restaurants with an entertaining or dancing component South of Fifth Street and in the Sunset Harbor area (Item R5D) and the proposed 2 a.m. cut-off on the sale of alcohol South of Fifth Street until such time as a meaningful Economic Impact Study has been prepared and presented to the City Commission and to the public for analysis and review.

Until such time that I am convinced that the proposed ordinances are in the best interest of all Miami Beach residents and voters, I am 100% opposed to R5D and the 2 a.m. alcohol cut-off.

Sincerely,

 JENNIFER ZOIN  
\_\_\_\_\_, REGISTERED VOTER YES \_\_\_\_\_ NO \_\_\_\_\_  
ADDRESS 737 JEFFERSON AVE. MIAMI BEACH, FLORIDA  
OCCUPATION EVENT COORDINATOR  
DO YOU OWN RENT

1

Survey

Do you think restricting the sale of alcohol to 2 a.m. will have a negative economic impact on the City of Miami Beach?

Yes ☒ No ☐

Do you think prohibiting any new restaurants South of Fifth Street and/or in the Sunset Harbor area will have a negative economic impact on the City of Miami Beach?

Yes ☒ No ☐

Do you think that the City of Miami Beach Commission and Mayor have a duty to conduct an independent economic impact study prior to enacting any new legislation that impacts bars, restaurants, or nightclubs? Yes ☒ No ☐

Print Name

JENNIFER ZONIN

Signature

*Jennifer Zonin*

Occupation

EVENT COORDINATOR

Address

737 JEFFERSON AVE.

E-mail

MIAMI BEACH, FL

Telephone

305.532.3188

Are you registered to vote? Yes ☒ No ☐

Voter Registration # (or Date of Birth)

8-29-68

Are you a resident of Miami Beach? Yes ☒ No ☐ If yes, for how long? 3 yrs.

Do you own or rent your home on Miami Beach? Own ☒ Rent ☐ N/A ☐

Do you work on Miami Beach? Yes ☒ No ☐ If so, where? NEMO RESTAURANT

Did you move to Miami Beach to work in the "nightlife" industry? Yes ☐ No ☒

Did you move to Miami Beach for the nightlife? Yes ☐ No ☒

# FLORIDA VOTER REGISTRATION APPLICATION FORM

YOU CAN USE THIS FORM TO: REGISTER TO VOTE IN THE STATE OF FLORIDA • CHANGE NAME OR ADDRESS • REPLACE YOUR DEFACED, LOST, OR STOLEN REGISTRATION IDENTIFICATION CARD • REGISTER WITH A POLITICAL PARTY OR CHANGE PARTY AFFILIATION • UPDATE YOUR SIGNATURE

## DEADLINE INFORMATION:

If this is a new registration form, the date the completed form is postmarked or hand delivered to your county supervisor of elections will be your registration date. You must be registered for at least 29 days before you can vote in an election. If your application is complete and you are qualified as a voter, a registration identification card will be mailed to you.

## HOMESTEAD EXEMPTION (BOX #11):

If you have a homestead exemption in Florida and you register in a precinct other than the one in which the homestead property is located, the applicable property appraiser will be notified. Your property may be subject to back taxes and your homestead exemption terminated, if it is determined that you are not entitled to such an exemption.

## PARTY AFFILIATION (BOX #13):

If you wish to register with a major political party, place an "X" in the box preceding the listed party with which you wish to affiliate.

## TO REGISTER, YOU MUST:

- Be a U.S. citizen. (BOX #2)
- Be a Florida resident. (BOX #8)
- Be 18 years old (you may pre-register if you are 17). (BOX #5)
- Not now be adjudicated mentally incapacitated with respect to voting in Florida or any other state. (BOX #4)
- Not claim the right to vote in another county or state.
- Not have been convicted of a felony in Florida, or any other state, without your civil rights having been restored. (BOX #3)
- Complete all information in the black boxes on the form. (BOXES #2, 3, 4, 5, 6, 7, 8 & 17)
- Submit your valid Florida driver's license number or Florida identification card number. If you do not have either of these, you must provide the last four digits of your Social Security number. (BOX #6)

If you wish to register with a minor political party, place an "X" in the box preceding "Other" and print the name of the party with which you wish to affiliate. If you wish to register without party affiliation, place an "X" in the box preceding "No Party Affiliation."

## NOTICE:

The office at which you register, or your decision not to register, will remain confidential and will be used only for voter registration purposes.

## QUESTIONS:

Contact the office of your county supervisor of elections for additional information.

## INFORMACION EN ESPAÑOL:

Sírvase llamar a la oficina del supervisor de elecciones de su condado si le interesa obtener este formulario en español.

PLEASE COMPLETE THE FORM BELOW. PLEASE PRINT USING A BLACK BALL POINT PEN.

- 1) BLACK BOXES MUST BE COMPLETED IN FORM BELOW FOR REGISTRATION TO BE VALID.
- 2) RETURN THIS COMPLETED FORM TO THE OFFICE OF YOUR SUPERVISOR OF ELECTIONS
- 3) IF YOU ARE A FIRST TIME VOTER IN THIS COUNTY APPLYING BY MAIL TO REGISTER TO VOTE, INCLUDE A COPY OF YOUR ID WITH THE APPLICATION
- 4) MAIL WITH FIRST CLASS STAMP.

REVISED 1/04

## FLORIDA VOTER REGISTRATION APPLICATION FORM

1	Check boxes that apply: <input checked="" type="checkbox"/> New Registration <input type="checkbox"/> Address Change <input type="checkbox"/> Party Change <input type="checkbox"/> Name Change <input type="checkbox"/> ID Replacement <input type="checkbox"/> Signature Update	OFFICIAL USE ONLY:
2	Are you a U.S. citizen? Yes? <input checked="" type="checkbox"/> No? <input type="checkbox"/> (If NO, you cannot register to vote)	IF YOU ANSWERED NO TO QUESTION 2, OR IF YOU DID NOT CHECK BOXES 3 AND 4, DO NOT COMPLETE THIS FORM.
3	<input checked="" type="checkbox"/> I affirm I am not a convicted felon, or if I am, my rights relating to voting have been restored.	
4	<input checked="" type="checkbox"/> I affirm I have not been adjudicated mentally incapacitated with respect to voting or, if I have, my competency has been restored.	
5	Date of Birth (MM/DD/YYYY) 08/29/1968	
6	FL DL# or FL ID# / If you do not have either, provide the last 4 Digits of SSN. 2350-420-68-809-0	
7	Last Name ZONIN Suffix (circle) Jr. Sr. II III IV First Name JENNIFER Middle Name/Initial	
8	Address Where You Live (Legal Residence) DO NOT GIVE P.O. BOX Apt/Lot/Unit 737 JEFFERSON AVE. 102 City MIAMI BEACH County of Legal Residence DADE State FL Zip Code 33139	
9	Mailing Address if Different from Above Apt/Lot/Unit City County State Zip Code	
10	Address Last Registered to Vote Apt/Lot/Unit City S. HUNTINGTON County SUFFOLK State NY Zip Code 11746	
11	Address of Homestead Exemption Property Apt/Lot/Unit City MIAMI BEACH County DADE State FL Zip Code 33139	
12	Former Name if Making Name Change Day Phone Number 305.538.9916	
13	Party Affiliation (Check only one) <input checked="" type="checkbox"/> Democratic Party <input type="checkbox"/> Republican Party <input type="checkbox"/> No Party Affiliation <input type="checkbox"/> Other (print party name)	
14	Race/Ethnicity (Check only one) <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black, not Hispanic <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> White, not Hispanic	
15	Sex <input type="checkbox"/> M <input checked="" type="checkbox"/> F Do you need voting assistance at the polls? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are you interested in being a poll worker? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No State or Country of Birth NY	
16	Are You: <input type="checkbox"/> Active Duty Military/Merchant Marine <input type="checkbox"/> Dependent of Active Duty Military/Merchant Marine <input type="checkbox"/> U.S. Citizen Currently Residing Outside the U.S.	
17	OATH: I do solemnly swear (or affirm) that I will protect and defend the Constitution of the United States and the Constitution of the State of Florida. I am qualified to register as an elector under the Constitution and laws of the State of Florida. I am a U.S. citizen. I am a legal resident of Florida. All information on this form is true. I understand that if it is not true, I can be convicted of a felony of the third degree and fined up to \$5,000 and/or imprisoned for up to five years. SIGNATURE: Sign or mark on line below. (Invalid without signature or mark.) Jennifer Zonin Date: 4.26.04	